

PATENT APPLICATION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:  
Mail Stop AF, Commissioner for Patents  
P.O. Box 1450, Alexandria, VA 22313-1450

on November 8, 2005

*[Handwritten signature]*  
Vidal A. Oaxaca, Reg. No. 44,267

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 10/748,973  
Applicant : Charles F. Kelty  
Filed : September 17, 2004  
Title : Skimmer and Filter

TC/A.U. : 1724  
Examiner : Fred Prince

Docket No. : 31626-1001  
Confirmation No. : 8829

AMENDMENT AFTER FINAL REJECTION  
UNDER 37 C.F.R. § 1.116(a)

**Mail Stop AF**  
Commissioner for Patents  
United States Patent and Trademark Office  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

RESPONSE UNDER  
37 C.F.R. § 1.116(a)  
EXPEDITED PROCEDURE  
*Examining Group 3671*

Sir:

In response to the Office Action dated September 8, 2005 please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 7 of this paper.

11/14/2005 DTESEM1 00000011 10748973

01 FC:2202  
02 FC:2201

200.00 DP  
100.00 DP



Filed in Duplicate  
PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Charles F. Kelty

Examiner: Fred Prince

Serial No.: 10/748,973

Group Art Unit: 1724

Filed: September 17, 2004

For: SKIMMER AND FILTER

AMENDMENT TRANSMITTAL

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment for the above application.

Applicant is a small entity (claimed under 37 CFR 1.27)  
 A Petition for Extension of Time accompanies this filing.  
 Also enclosed is a check for \$300.

**CALCULATION OF ADDITIONAL CLAIM AND/OR EXTENSION FEES:**

	Remaining CLAIMS: after Amendment	MINUS	Highest No. Previously Paid For	Present Extra	ENTITY RATE Small OR Large	FEE RATE
TOTAL	28		20	8	x \$25 = \$200.00 x \$50 = \$	
INDEP.	4		3	1	x \$100 = \$100.00 x \$200 = \$	
					+ \$180 = \$ + \$360 = \$	

**EXTENSION FEES** (One month = \$60 OR \$120, Two months = \$225 OR \$450, Three months = \$510 OR \$1020)  
MONTH(S)= \$

**TOTAL \$300.00**

A check in the amount of \$300.00 is attached.

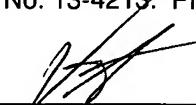
Check includes extension of time fee.

No extension of time is required, check is for claim fees only.

For the Commissioner's convenience this transmittal is submitted in duplicate. If any additional fee is required, please charge our Deposit Account No. 13-4213. Please refund any overpayments.

Dated:

By:

  
Vidal A. Oaxaca, Reg. No. 44,267  
Direct line: (505) 998-1505

PEACOCK MYERS, P.C.

P. O. Box 26927

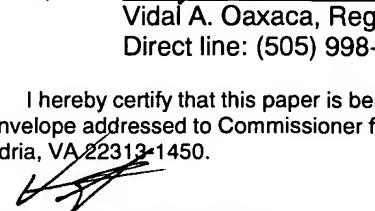
Albuquerque, New Mexico 87125-6927

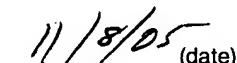
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Vidal A. Oaxaca, Reg. No. 44,267

  
11/8/05 (date)